# CENTRAL FAX CENTER

PAGE 2112

#### FEB 0 5 2007

Approved for use through 9/3/00. OMB 0651-003
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCI
a collection of information unless it contains a valid OMB control number Under the Paperwork Reduction Act of 1986, no persons are required to respond

Thomas Joel Massingill

P2112 Case:

Application No.: 10/718,383

Filing date: 11/19/2003

Art Unit 2826

Examiner:

Alexander O. Williams

Subject:

Semiconductor Package with Recess for Die

#### Certificate of Transmission under 37 CFR 1.8

Attention: Alexander O. Williams, Examiner

Fax No.: (571) 273-8300

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office

on\_02/05/2007

Date

Sheri Beasley

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Total Sheets Transmitted - 10

- Amendment Transmittal 1 sheet 1.
- Duplicate Amendment Transmittal 1 sheet 2.
- Response E 7 sheets
- Certificate of Transmission 1 sheet

Please call (831) 768-1755 if you have any questions.

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the intimidual case. Any comments on the amount of time required to complete this form should be sent to the Chief information Officer, Petent and Tradomark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

# RECEIVED CCPA CENTRAL FAX CENTER

### FEB 0 5 2007

		~				T > 10	2112	
	Transmission: Facsing			· C	ASE DOCKE	INO. P	2112	
In reference	e to application of T	homas Joel	Massingill					
Serial No.	10/718,383			÷				
For Sem	iconductor Package	e with Rece	ess for Die					
Sir				appli-at	under 27 C P	R 1312		
	ed herewith is and an ar		the apove-identified	appucation,	, wiuct 3 / C.F.	1.312.		
App]	additional fee is require licant claims Small ent fee has been calculated	ity status und	ler 37 CFR 1.27.			· ·		
		***	CLAIMS AS AMEI	NDED ****				
(1)	. (2)	(3)	(4)	(5)	(6)	(7)	(8)	
	Claims Remaining After Amendment	•	Highest No. Paid For Previously	Present Extra	Rate Small Entity	Rate Large Entity	Additional Fee	
Total Claims	7	Minus	** 20	0	\$ <sub>25</sub>	·\$ 50	\$ 0.00	
Indep Claims	2	Minus	*** 3	0	\$ 100	\$ 200	\$ 0.00	
☐ Fi	irst presentation of a m	ultiple depen	dent claim		\$ 0	\$ 0	\$ 0.00	
T	erminal Disclaimer Fee	es es					\$ 0.00	
Extension Fee			2nd Mon	ıth	☐ 3rd N	\$ 0.00		
			ime extensions and c	lisclaimer fe	es		\$ 0.00	
*** If the **** Mul	"highest Number Previ highest Number Previ tiple dependencies, if a ntry in column 2 is less	viously Paid F any, included	For" in this space is le l in the above calcula	ess than 3, wition.	vrite "3" in this	is space.		
A che	ck in the amount of	0.00	is attached.					
☐ Charg	ge \$ <u>0.00</u> to dep	posit account		luplicate of t	this sheet is en	closed)		
	e charge any additional losed.	fees or credi	t overpayment to De	posit Accou	nt <u>50-0534</u>	. A duplic	cate of this sheet	
			Dames (6.16. 6	uhmina /	Donald R. Boys			
1			Respectfully S	uomitted, _'	Donald R. Boys			
	t Patent Agency, Inc. sy, Suite D CA 95076				Reg. No. 350	/4		

#### FEB 0 5 2007

Method of	Transmission: Facsi	mile	CA	CASE DOCKET NO. P2112								
In reference to application of Thomas Joel Massingill												
Serial No. 10/718,383												
For Semiconductor Package with Recess for Die												
Sir: Transmitte	ed herewith is and an a	mendment in	the above-identified	application,	under 37 C.F.	R. 1.312.						
App	dditional fee is require licant claims Small en fee has been calculate	tity status und	ler 37 CFR 1.27. low.				,					
		***	CLAIMS AS AME	NDED ****			·					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)					
	Claims Remaining After Amendment	e .	Highest No. Paid For Previously	Present Extra	Rate Small Entity	Rate Large Entity	Additional Fee					
Total Claims	.7	Minus	** 20	0	\$ <sub>25</sub>	\$ 50	\$ 0.00					
Indep Claims	2	Minus	*** 3	0	\$ 100	\$ 200	\$ 0.00					
☐ Fi	First presentation of a multiple dependent claim \$ 0 \$ 0											
□ T	Terminal Disclaimer Fees											
Extensio	n Fee	th 3rd Month			\$ 0.00							
Total additional for claims, time extensions and disclaimer fees \$ 0.00												
** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.  *** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.  **** Multiple dependencies, if any, included in the above calculation.  * If the entry in column 2 is less than the entry in column 4, write "O" in column 5.												
A check in the amount of 0.00 is attached.												
Charge \$ 0.00 to deposit account 50-0534 (A duplicate of this sheet is enclosed)												
▼ Please charge any additional fees or credit overpayment to Deposit Account 50-0534. A duplicate of this sheet is enclosed.												
	Respectfully Submitted,   Donald R. Boys											
	Donald R. Boys Reg. No. 35074											
Central Coast 3 Hangar Wa Watsonville, (831) 768-17.	CA 95076											

# RECEIVED CENTRAL FAX CENTER

FEB 0 5 2007

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 2826

Examiner: Alexander O. Williams

In Re:

Thomas Joel Massingill

Case:

P2112

Serial No.: Filed:

10/718,383 11/19/2003

Subject:

Semiconductor Package with Recess for Die

Commissioner for Patents PO Box 1450 Alexandria, VA 22313

Dear Sir:

# Response E